

Priority: Safety **Lead Agency:** Health Department
Program Offer Type: Existing Operating **Program Contact:** HOUGHTON David B
Related Programs:
Program Characteristics:

Executive Summary

Preparing for and responding to emergencies with widespread or severe health impacts requires multi-agency, multi-jurisdictional, and public/private sector collaboration. Three Health Department programs contribute to this: 1) Public Health Preparedness assures that we can carry out the County's unique public health responsibilities in an emergency; 2) Regional Health System Emergency Preparedness assures that hospitals and other private health care providers in the 6-county NW Oregon region have proven capacity to care for victims of large scale emergencies; 3) Pandemic Influenza Preparedness develops the special response and community engagement capacities necessary to respond to the special challenges of a pandemic. All programs apply the National Incident Management System (NIMS) framework, and all are coordinated with the County's Office of Emergency Management.

Program Description

Responding to emergencies with severe health impacts (e.g., natural disasters, severe epidemics, terrorist attacks) requires coordinated action to 1) focus response efforts on priority needs, and 2) leverage resources of government, private health providers, and non-profit organizations. This offer assures public and private health preparedness. Public Health Preparedness: 1) develops emergency plans and protocols linked to the County's Emergency Response Plan; 2) trains and exercises an expert Incident Management Team to lead the Department's response; 3) conducts exercises to test and refine plans and capacities, and 4) creates expandable capacity for key public health functions (e.g., epidemiology resources to investigate and analyze the emergency health impacts). Regional Health System Preparedness facilitates a health care preparedness delivery system in Multnomah, Clackamas, Washington, Columbia, Tillamook and Clatsop counties. It assures that hospitals, clinics and other providers are prepared to respond in an effective and coordinated manner. The program: 1) ensures that hospitals and other providers develop and exercise plans to increase the number of patients they can serve; 2) creates regional plans to coordinate public/private responses; 3) develops regional capacities to address communication and other support needs; and 4) develops regional capacities to manage specific health impacts (e.g., mass trauma, burns, and chemical exposure). Pandemic Influenza Preparedness is complementary; it addresses extraordinary capacities that are necessary to respond to a pandemic. It emphasizes institutional and community education. It also works with stakeholders to develop critical pandemic response capacities (e.g., quarantine, business continuity, and school or class cancellation).

Program Justification

This offer supports the public safety system by getting the regions health systems—hospitals, health networks, clinics, and providers—prepared to prevent, and respond to emergencies.” The programs utilize coordination and collaboration to develop effective governmental and private sector health response capacities in the County and region.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY06-07)	Current Year Purchased (FY07-08)	Current Year Estimate (FY07-08)	Next Year Offer (FY08-09)
Output	Number of IMT members trained, maintained & annually exercised.	90	93	90	90
Outcome	Hlth Org., expressing program has improved ability to respond to Hlth Emergency	80.0%	90.0%	88.0%	90.0%
Quality	Stakeholders satisfied w/program activities, based on Likert scale.	90.0%	95.0%	90.0%	95.0%
Output	Community partners added to existing stakeholder inventory.	0	0	50	50

Performance Measure - Description

PH Preparedness: Number of staff receiving NIMS-approved training, and participating in response exercises. Regional Health Preparedness: Key stakeholders' and organizations' perceived progress on program goals, and satisfaction with program activities/services. Pandemic Influenza: Number of community partner organizations informed & engaged in pandemic flu planning and exercises (e.g., elected officials, businesses, schools, social service agencies, local law enforcement and faith based organizations).

Legal/Contractual Obligation

ORS 431 and 433 empower the County and Health Department to supervise matters related to preserving the life and health of the people of the County. An IGA with Oregon DHS (Public Health Division) provides funding from the CDC and guidance for Public Health preparedness activities, including pandemic influenza preparedness. A separate IGA with DHS provides funding from the US Dept. of Health and Human Services, and guides regional health system preparedness goals and activities. Both sources of Federal funds are dedicated to emergency preparedness, and cannot supplant other funding or be used to build general capacities.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2008	2008	2009	2009
Personnel	\$0	\$439,408	\$0	\$621,471
Contracts	\$0	\$15,500	\$0	\$19,979
Materials & Supplies	\$0	\$67,614	\$0	\$40,385
Internal Services	\$0	\$99,575	\$0	\$126,698
Subtotal: Direct Exps:	\$0	\$622,097	\$0	\$808,533
Administration	\$13,918	\$0	\$10,969	\$0
Program Support	\$251,471	\$94,219	\$269,072	\$284,870
Subtotal: Other Exps:	\$265,389	\$94,219	\$280,041	\$284,870
Total GF/non-GF:	\$265,389	\$716,316	\$280,041	\$1,093,403
Program Total:	\$981,705		\$1,373,444	
Program FTE	0.00	6.30	0.00	5.99
Program Revenues				
Indirect for dep't Admin	\$36,307	\$0	\$44,596	\$0
Intergovernmental	\$0	\$622,097	\$0	\$808,533
Program Revenue for Admin	\$0	\$94,219	\$0	\$284,870
Total Revenue:	\$36,307	\$716,316	\$44,596	\$1,093,403

Explanation of Revenues

Public Health Emergency Preparedness is supported by Federal Centers for Disease Control (CDC) funds received via the Oregon Department of Human Services (DHS), Public Health Division. Regional Health System Emergency Preparedness is funded by the US Dept. of Health and Human Services via the Oregon DHS/Public Health Division and the Oregon Association of Hospitals and Health Systems.

Significant Program Changes

✔ Significantly Changed

Last year this program was:

#40005 Public Health and Regional Health Systems Emergency

Emergency Preparedness funding was cut by ~30% during FY08. This cut is disproportionately large relative to the County's population and community's complexity. This results from a statewide funding formula that provides base funding for each county and de-emphasizes per-capita funding.